

CLAIMS ONLY

SERIAL NO. 69848397 FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2	/					
3	/					
4	/					
5	/					
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7	/					
8	/					
9	/					
10	/					
11	2					
12	2					
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TOTAL IND.	1		↓		↓	
TOTAL DEP.	25		↔		↔	
TOTAL CLAIMS	26					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.			↓		↓	
TOTAL DEP.			↔		↔	
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS